

Feminist Writings
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The Yellow Wallpaper - Part 2

So hello and welcome to this NPTEL course entitled feminist writings. So we were looking at Charlotte Perkins Gilman's Yellow Wallpaper. So we have already started with this text and will continue with this in this lecture. So we have seen how in the previous lectures there was very interesting tension between the female exceptionality and male medicality, and the male medical knowledge seems to patronize the female suffering, the protagonist is suffering, they did not take that seriously as a disease and has a very condescending and patronizing attitude to it said.

So in this section we will find how that, you know that that sense of being patronize continues throughout those text and as I mentioned already this particular text, text from diary writing, diary entry and it gives you a sense of urgency and immediacy. So, you get a sense that you are reading it at the same time that was happening. So it tells you things such as, I can hear the footsteps coming, I can hear John Coming, I must stop writing, etc.. And you seem to share, you know, the temporality of the writing process in the moment of you reading it. So so the writing process and the voice of the writer the speaker in this particular section or the particular treaties seems to be cold temporal without the reader reading it.

So we will see how that kind of tension and how that idea of this experience of being patronized continuous throughout this text. And we saw how she was forbidden from writing anything and that because that was supposed to have created self-absorption and ((1:37)), and that is not something that the doctors have prescribed for. The male doctors wanted to think outside of yourself all the time, as a result of which she is during this clandestinely secretly.

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atrocious nursery, and there is nothing to hinder my writing
as much as I please,
save lack of strength.
John is away all day, and even some nights when his cases
are serious.
I am glad my case is not serious!
But these nervous troubles are dreadfully depressing.
John does not know how much I really suffer. He knows
there is no reason to suffer, and that satisfies him.
Of course it is only



Okay. And now we are told that, John is away all day. John being the male medical doctor, the husband. John is away all day and even some nights when his case was a serious. I am glad my case is not serious. So again, we have this whole idea of not taking this seriously, considering this to be some kind of a severe disease or you know (())(2:06) which is not really not a proper disease. And obviously that sense of not taking this properly as a disease is a very, very male, a patronizing perspective from a medical sense.

But these nervous troubles are dreadfully depressing. John does not know how much I really suffer. He knows, there is no reason to suffer and that satisfies him. So the whole idea of reason becomes very important over here. Because the reason is a very male tool in this particular section and what, whatever cannot be fathomed with reasons, with rationality empirically is not taken seriously.

So anything that is outside the empirical gambit, or the Gambit of empirical knowledge, you know it is not taken seriously by John, the male medical you know figure. So we have this very interesting collusion between a patriarchy and medicine at work over here and that collusion is what makes us feel more protagonists suffer because you know that kind of collision of gaze, the patriarchal gaze, and the medical gaze, which refuses to take this seriously, which refuses to treat this with dignity and which essentially (())(3:07) confines her and (())(3:10) to certain kind of treatment that she does not get anything out of and she ends up suffering more.

And if will find how the end yellow wallpaper becomes very symbolic symbolic space because what happens in yellow wallpaper is you know the entire idea of the female figure in a your wallpaper seem to be speaking to her as a form of entrapment, as an experience of entrapment.

So we have seen already how the movement in this particular text one from a version to one of appropriation a version to association. So, she is essentially at the beginning of the text, she loads the start of the year yellow wallpaper she was suggested by it. But yet at the end, she finds herself associated with that and it sends that a woman figure in the yellow wallpaper seems to be her. And when she takes it down, when she tears it out or the yellow wallpaper and when she tears the wallpaper out of the wall, essentially she feel experience of (4:02), right. And that, that experience of (4:05) is something which is very symbolic as well as experiential in quality.

Okay! So you know we are told over and over again that John really finds no reason to take this seriously and that satisfies them than the fact that there is no reason for her to suffer.

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nervousness. It does weigh on me so not to do my duty in any way!
I meant to be such a help to John, such a real rest and comfort, and here I am a comparative burden already!
Nobody would believe what an effort it is to do what little I am able,—to dress and entertain, and order things.
It is fortunate Mary is so good with the baby. Such a dear baby!
And yet I cannot be with him, it makes me so



Of course, it is only nervousness. It does weigh on me, so not to do my duty in any way. So it is just nervousness. So the whole idea of female nervousness, I talked about hysteria in the previous lecture and how there was a very conveniently classified as a female (4:33) something which happens to woman alone. And of course this classification and this medical classification is was very male classification was something which was done by male doctors.

And we find this figure of the (())(4:46) the very famous American physician, a neurologist maybe, he has very spectral presence throughout the text. And she, he is very much the figure of authority, which is dictating these rules of medical practice, of confining, coalition, rest cure and all the rest of it. So what this protagonist is going through, is a very famous (()) (5:09) rest cure.

So, the rest cure is where the protagonist, or the the patient is forced to rest, is confined to a how it is given us some kind of diet over a day and it is taken away from all kinds of emotional all kinds of social connections, and it is made to be a recluse, till he or she recovers, she in more occasions. So the whole idea of therapy through confinement, therapy through containment is very much a part of the rest cure package that (())(5:38) the American doctor had prescribed, so Michelle is a very important figure in this particular texts. And as I mentioned already in the previous lecture, that Gilman at the end of writing this book sent a copy of this book to (())(5:51) as some kind of symbolic reprimand to the Michelle at rest cure on, and of course she never heard back from him, unsurprisingly.

Okay! And then she goes on to say to speaker, goes on to say the narrator goes onto say “I meant to be such a help to John, such a real rest and comfort, and here I am a comparative burden already. So she is made to feel guilty for not being productive enough or not being, a utilitarian enough, etc. And then you know are we told that how John was a very busy doctor who embodies rationality, who embodies male medical logic and according to that male medical logic, you know this particular symptom, this particular condition that she is suffering should not be taken seriously, it is not really a disease at all. And all she needs is rest cure.

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nervous.

I suppose John never was nervous in his life. He laughs at me so about this wallpaper!

At first he meant to repaper the room, but afterwards he said that I was letting it get the better of me, and that nothing was worse for a nervous patient than to give way to such fancies.

He said that after the wallpaper was changed it would be the heavy bedstead, and then the barred windows, and then



Okay. So that is something which told to us over and over again. And then we are told by the narrator, that I suppose John never was nervous in his life. He laughs at me so about this wallpaper. So when I tell them about the wallpaper, I want to tell them about my discomfort with the wallpaper John laughs to me you know and just brushes it aside and in a very patronizing way. So I suppose John Never was nervous in his life. So you know nervousness is not really something which happens to men or men are never nervous, it is always women who are nervous.

So, this is kind of a crude binary and we can see how even the medical symptoms, how the medical classifications are very conveniently mapped onto this gender binary. The male men are never nervous. Men are all rational. Men are always, you know, in control of whatever they are doing, whereas woman, are always hysteric, they all always prone to hysteria they always vulnerable to hysteria.

And yet at the end of this book, we find the person of the person who feigns, the person who (())(7:30) out is the great medical male figure John he (())(7:35) he faints in the end, you know to see and when the wallpapers toned down, so in this area is actually conferred to the male.

Okay! And then you know we are told at first he meant to repaper the rooms. At first, he agreed that you know she repaper the room, take this paper away. But afterwards he said that

I was letting it get the better of me, and that nothing was worse for a nervous patient than to give way to search fancies. So fancy is a very important word over here. And we are told that you know John, the great male medical figure forbids her from imagining too much, forbids a from storytelling, forbids from introspecting, forbids from self-absorption and always forbiddenness all this idea of forbidding of from all these different things is very much part of the male medical logic of confinement and kill and containment and all that is done in a very empirical kind of ways.

Anything which is outside the empirical camp is forbidden by default, and she is told that we should not be given giveaway to such fancies, giveaway to such imagination or imaginative inwardness as it were.

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that gate at the head of the stairs, and so on.

"You know the place is doing you good," he said, "and really, dear, I don't care to renovate the house just for a three months' rental."

"Then do let us go downstairs," I said, "there are such pretty rooms there."

Then he took me in his arms and called me a blessed little goose, and said he would go down cellar, if I wished, and have it whitewashed into the



bargain.

But he is right enough about the beds and windows and things.

It is an airy and comfortable room as any one need wish, and, of course,

I would not be so silly as to make him uncomfortable just for a whim.

I'm really getting quite fond of the big room, all but that horrid paper.

Out of one window I can see the garden, those mysterious deep-shaded



So he said that after the wallpaper was changed, it would be the heavy bedstead, and then the barred windows and then the gate at the head of the stairs, and so on. He told how to read categorically that, you know, if you change the wallpaper now you will start changing everything else and it is never going to answer. So it is very important that you get in a grip on a situation you calm down.

Again this is very male kind of (())(8:58) to ask a woman to calm down, presupposing that a woman is not calm, presupposing that a woman is a very very hysteric already.

Okay! And then we are told then he took me in his arms and call me a blessing little goose and said he would go down cellar, if I wished, and have it whitewashed into the ball game. So, and know this whole idea of taking the woman in his arms and calling her endearing names as part of the patronizing package as part of the, male idea of confinement and containment at this time through affection or you know apparent affection, where he takes her in his arms and calls my blessed goose, and then essentially tells him how that, and I am going to do anything, and everything for you. But you know, he is for your own good or not, you are taking the wallpaper down, right?

So this whole idea of patronizing kindness, patronizing benevolence, patronizing endearment is part of the you know perspective or the gaze that she is subjected to, right? I am talking about gaze talking about medical gaze is important that we make the connection to a text which you have done previously, which is Sylvia Plath's Tulips, because even there we find that a female protagonists to speak up in the poem is subjected to the three male medical gaze

all the time and then she suffers an experiential crisis, an existential crisis, and that that takes away her agency, that takes away her mobility, at mortal level as well as a more extended embodied level.

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weakness like mine is sure to lead to all manner of excited fancies, and that I ought to use my will and good sense to check the tendency. So I try.

I think sometimes that if I were only well enough to write a little it would relieve the press of ideas and rest me.

But I find I get pretty tired when I try.

It is so discouraging not to have any advice and companionship about my work. When I get really



well, John says we will ask Cousin Henry and Julia down for a long visit; but he says he would as soon put fireworks in my pillow-case as to let me have those stimulating people about now.

I wish I could get well faster.

But I must not think about that. This paper looks to me as if it knew what a vicious influence it had!

There is a recurrent spot where the pattern lolls like a broken neck and two



Okay! So, and then we are told that you know how space becomes very very important a way out and how the whole idea of being confined to a space as part of the rest cure method advice and advocated and prescribe by (())(10:37) Michelle and John is very much positive tradition that medical tradition of a rest cure and then we were told that it is so discouraging and then she goes on to say “it is so discouraging not to have any advice and companionship about my work. When I get really well”. John says, he was ask Cousin Henry and Julia down for a long visit, but he says he would as soon put fireworks in my pillowcase as to let me have those stimulating people about now. So again, the whole idea of not stimulating up and the whole idea of forcibly calming her down is very much part of the rest cure method.

And then, you know, she says quite clearly that you know I really wish I had some companionship. I really wish I had someone to talk to, someone to advise me and talk to me about my work. And the whole idea of writing, not taking writing seriously, not taking the woman writer seriously is part of the male medical, gaze, which is empirical, rational, logical, and anything outside that parameter is not taken seriously, is considered to be child's play, considered to be trivial, trivial activity.

And so we will be find a way as something which I have discussed already, which is a complete exhaustion of empathy, a complete crisis of empathy, result impacted connect. There's no human connected and human levels. So we have this medical machines, we have this medical medicines and the medical gaze, which is very empirical, very rational, very logical, very material and quality, confining them containing up at a certain space and certain speciality, and that space generates certain identities or crisis of identity.

But we also told over and over again that there is actually no empathetic connect that John does not understand up John does not even try to understand up and he forbids from writing and forbids from seeing people and he tells her it is all for our own good. But of course she suffers it all the more because of that, right?

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Then the floor is scratched and gouged and splintered, the plaster itself is dug out here and there, and this great heavy bed which is all we found in the room, looks as if it had been through the wars.

But I don't mind it a bit— only the paper.

There comes John's sister. Such a dear girl as she is, and so careful of me! I must not let her find me writing.

She is a perfect and enthusiastic housekeeper, and hopes for no better



profession. I verily believeshe thinks it is the writing which made me sick!

But I can write when she is out, and see her a long way off from these windows.

There is one that commands the road, a lovely shaded winding road, and one that just looks off over the country. A lovely country, too, full of great elms and velvet meadows.

This wallpaper has a kind of subpattern in a different shade, a particularly



irritating one, for you can only see it in certain lights, and not clearly then.

But in the places where it isn't faded and where the sun is just so—I can see a strange, provoking, formless sort of figure, that seems to skulk about behind that silly and conspicuous front design.

There's sister on the stairs!



And then we are told the, the other woman figure and the story appears, that is John's sister, and it is very important how the two woman figures how the two female figures contrast with each other. There comes John's sister, such a dear girl as she is, and so careful of me! I must not let her find me writing. So again, the whole idea of hearing footsteps coming up, the whole idea of seeing someone coming in and stopping to write immediately is conveyed to the reader as well, all the time. So we get a sense of you reading it even as it is being written. So there is a sense of present continuous, which is always that in the story, and that gives you a sense of immediacy, a sense of urgency, a sense of theatricality, and also it really dramatizes the exponentially in the story, and we have talked about exponentially all the time where looking at feminist writings because the whole point of feminist writings is to look at the entanglement between exponentially and textuality.

So (13:10) literally a mode of textual production. So a text has been produced out of an experience. So there is constant connection. The constant of Osmosis as it were, or symbiosis between the text and the experience is something which we must never lose sight of while reading this you know particular book. So I must not let her find the writing and we are told that she is perfect and enthusiastic housekeeper, and hopes for better profession. I verily believe she thinks it was the right thing, which made me sick.

So she, John's sister (13:42) as a complete conformist so she is very much part of the housekeeper, an identity that is very, very conveniently conferred onto the woman. So she is a perfect housekeeper. She keeps everything in place and she thinks verily that you know the writing is what making what is making her sick. So she should stop writing according to John's sister. So John's sister is very much part, is very much complicit with the entire male medical narrative of containment and confinement and rest cure that is, she is been subjected to him.

Okay! So, then we know we are told at this point how she begins to see a figure on the wallpaper. She begins to see, she begins to discern a presence in a wallpaper in a very, very interesting way. We are told that this wallpaper has a kind of sub pattern in a way, in a different shade, particularly irritating one, for you can only see it in certain lights and not clearly then. But the places where it is not faded and where the sun is just so- I can see a strange, provoking, formless sort of figure that seems to skulk about behind the silly and conspicuous front design.

So you know that she seems to see a figure lurking behind the, the conspicuous design. So she is very, very disturbed by the lack of harmony, lack of symmetry in the wallpaper, but she seem to see through the symmetry of the lack of virtue, seems to see some kind of provoking formless sort of figure emerging out of it, right and that is that is silly and that seems a skulk about behind the silly and (15:06).

So beneath the shallow superficial front design, if she looks well enough and life force and conditions, she is able to seam a formless sort of figure and we see this as a figure that is very symbolic in quality, and that figure will get more and more shade as the story progresses, and at the end she will find that that figure is actually her and that she will tear it down and in the process of tearing down the wallpaper, she will experientially emancipate yourself from this

medical gaze and as a result (())(15:35) the male medical figure will faint John, the Great John, the great husband medical officer will faint at the moment that happens.

And then we are told there is sister on the stairs. So, we can hear the sister coming up on the stairs again. So almost stop writing. So I cannot go on, I should not go on because I am forbidden to go on.

So again, we are told and the reason why I am doing these sections very very sort of closely because I am going to skip a little bit from now on and move on to the important passages because I am hopefully will be get a sense of what is really happening. The drama of Claustrophobia, the drama of containment, the drama of confinement, where this female figure is confined to a certain space and was forced to take rest, is forced to be disconnected from all kinds of social reality, all kinds of social connections. And that, that violence, which is there ironically in this rest cure is very much part of the male medical package, the male medical gaze that she subjected to. So you know this very interesting relationship to be unpacked between treatment, medical treatment and medical violence.

And of course we see how you can look at the history of medicine in this collusion between medicine and masculinity. Medicine and male gaze is always been historically true in all kinds of situations, especially in the history of Western medicine. And of course the state has always been a Caluda, to this kind of a narrative where the state controls medicine, where the state controls medical politics, where the state controls definitions of hygiene, definitions of health etc.

And more often than not that definition, those definitions of hygiene and health and harmony are very very male patriarchal and perspective as a result of which anything which is outside those definitions is considered to be a transgressive, considered to be unhealthy, considered to be in need of cure. And that cure, the process of cure is very often, a very violent process as you can see over here.

So, violence over here is physical violence. She is going to find in a room and all sorts emotional and psychological violence because she is not allowed to get out and make the connections, the social connections, the empathetic connections, which will make it better. And also she not allowed to express a free self and writing. So the whole idea of right in the whole idea of textual production in this particular book becomes a very very (())(17:41) and

secret process, and in the secrecy lies the lack of agency and also the articulation of agency to a certain extent, because does manage to articular the agency through the process of writing. So again, we are back between making the connection between texts, reality, and experientiality, which is what we continued doing throughout this course. So I will stop at this point today and I will continue with the text in the next lectures, thank you for your attention.